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Further experiments with infected mayonnaise dressing have shown that under laboratory conditions typhoid bacilli will probably not proliferate but will gradually decrease in number at 31° C. In one experiment, judging by the number of colonies on Endo plates, the content of 1 cubic centimeter of the salad dressing immediately, 2, 4, and 24 hours after infection was 10,000,000, 5,000,000, 500,000, and 2,500 typhoid bacilli, respectively. There remain, therefore, three possibilities: that the mayonnaise dressing was so heavily infected that enough organisms remained a few hours after its preparation to cause the intense incidence of the disease; that the veal, chicken, and celery used in the salad were similarly infected in chopping and mixing just before the dinner; or that the infection took place in some other manner at the banquet.

The feature of chief importance in the outbreak was the great variability in symptoms exhibited, from those of the classical picture of the disease. This variability is a characteristic which typhoid fever shares with many infections; but the intensity of prevalence from a sharply limited infection is seldom such as to show this clearly.

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## YELLOW FEVER AT THE NEW ORLEANS QUARANTINE STATION.

In view of the rarity of the occurrence of yellow fever in the United States, the following account of a case detected on an incoming vessel at the New Orleans quarantine station is of interest.

The vessel, upon arrival at the quarantine station, was three days out from Vera Cruz, where yellow fever was known to be prevailing. At the time of inspection at quarantine, the patient's temperature was 40.3° C., pulse 80, respiration 30, eyes bright and suffused, the ocular conjunctivæ being distinctly congested and yellowish; the skin of the face and neck was hot, dry, and congested; the lips were somewhat puffy and congested; and the saliva appeared chocolate-colored. The lungs and heart were apparently normal, and the spleen and liver were not enlarged. Just prior to removal to the quarantine hospital the patient vomited a quantity of chocolate-colored fluid containing partially digested blood. A specimen of urine obtained by catheterization showed, when treated by appropriate reagents, a large precipitate of serum albumen. The patient became unconscious soon after removal to the hospital and, in the night, collapsed and died. This was on September 3.

The history of the case prior to arrival, as elicited from the master of the vessel, was to the effect that the patient complained of a headache on the evening of August 31, with some nausea and pain in the extremities. He had no chill and was constipated. At that time the temperature of the patient, as taken by the master, was 39.6° C. On September 2, the temperature registered 40.7° C. The pulse was not examined by the master. The patient in the meantime had vomited several times.

This case, therefore, presented a classical picture of yellow fever, viz, black vomit, heavy albuminuria, congested facies, and yellowish conjunctivæ, disproportion of temperature and pulse, and jaundice of the skin.

Appropriate treatment was taken against the vessel and contacts.

## PRINCIPAL CAUSES OF DEATH, JUNE AND JULY, 1920.

The accompanying table is reprinted, by permission, from the Statistical Bulletin of the Metropolitan Life Insurance Co. for August, 1920. The figures are based on the strength of approximately 13,000,000.

Although these rates apply to a selected group, they give comparative mortality conditions for the periods covered.

Compared with the month of June and the year 1919, the death rate for July is exceedingly low. The rate, 8.2 per 1,000, represents a decline of 15 per cent from the figure for June.

*Death rates per 100,000 for principal causes, June and July, 1920, and year 1919.*

[Industrial Department, Metropolitan Life Insurance Co.]

| Cause of death. | Rate per 100,000 lives exposed. | | |
|---|---|---|---|
| | July, 1920. | June, 1920. | Year 1919. |
| Total, all causes | 815.5 | 959.0 | 1,063.0 |
| Typhoid fever | 5.6 | 5.2 | 7.3 |
| Measles | 7.5 | 12.7 | 3.5 |
| Scarlet fever | 2.7 | 5.9 | 3.9 |
| Whooping cough | 4.8 | 6.9 | 3.2 |
| Diphtheria | 12.4 | 16.7 | 20.9 |
| Influenza | 8.2 | 15.7 | 96.9 |
| Tuberculosis (all forms) | 132.5 | 154.3 | 156.5 |
| Cancer | 67.8 | 73.8 | 67.0 |
| Meningitis (all forms) | 5.7 | 7.0 | 6.4 |
| Cerebral hemorrhage | 48.3 | 61.5 | 59.8 |
| Organic diseases of heart | 100.7 | 116.8 | 113.9 |
| Pneumonia (all forms) | 34.0 | 72.3 | 117.2 |
| Other respiratory diseases | 11.4 | 16.4 | 17.0 |
| Diarrhea and enteritis | 18.0 | 13.3 | 16.9 |
| Bright's disease | 63.7 | 71.8 | 73.5 |
| Puerperal state | 19.3 | 21.2 | 20.0 |
| Suicides | 6.1 | 7.5 | 6.8 |
| Homicides | 5.3 | 6.2 | 6.9 |
| Other external causes (excluding suicides and homicides) | 72.9 | 60.6 | 80.4 |
| Traumatism by automobile | 13.5 | 12.4 | 10.7 |
| War deaths | (1) | (1) | 16.6 |
| All other causes | 188.9 | 213.2 | 184.9 |

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[1] Less than 0.05 per 100,000.